## WITHDRAWAL

JD-CV-41 Rev. 1-18

ADA NOTICE
The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA.

## STATE OF CONNECTICUT **SUPERIOR COURT**

www.jud.ct.gov

Docket number

HFH-CV-20-6015624-S

Return date (For Civil and Housing cases only)

Feb-04-2020

Instructions:

**427883** 

Mailing address (Number, street, town, state and zip code)

100 PEARL STREET P.O. BOX 231277 HARTFORD, CT 06123

Complete this form by selecting any applicable withdrawar categories below.     File with the clerk.					Answer date (For Small	Claims cases only)	
Name of case (F	irst-named Plaintiff	vs. First-named Defendant)			·		
SGS PRATT	「99 LLC, SUC	CESSOR IN INTEREST TO TR		NIQUE HOSPITALITY SER	VICES, LLC D/B/A	THE RUSSELL	
Judicial District	X Housing Session	80 WASHINGTON ST HARTF	• •	106			
(Do not check	e (Complete) the following two partial withdrawa	boxes if any intervening complaints	s, cross compla	ints, counterclaims, or third par	ty complaints remain p	ending in this case.	
(WDACT)	X The Plain	The Plaintiff's action is WITHDRAWN AS TO ALL DEFENDANTS without costs to any party.					
(WOARD)	A judgment has been rendered against the following Defendant(s):						
	and the P	laintiff's action is WITHDRAWN	AS TO ALL F	REMAINING DEFENDANTS	without costs.		
Partial With The followin (WDCOMP) (WOC) (WDCC) (WDCOUNT)	g pleading(s). Complain Countercl Cross Co		(WAPPCOM) (WDINTCO) (WDTHPC)	Apportionment Compl Intervening Complaint Third Party Complaint	aint		
(WOAAP)	Plaintiff(s)	:					
(WOAAD)	Complain	against defendant(s):				only without costs	
(WOM)	0.1					Only Without Costs	
Signature of	of Filer(s)						
Party P-01	SGS PRATT 99	LLC, SUCCESSOR IN INTER	; By <b>UPDIK</b>	E KELLY & SPELLACY		Attorney or Self- represented party	
Party			; By			Attorney or Self-	
Party			-			represented party Attorney or Self-	
Party			; By ; By			represented party Attorney or Self-	
Name &	KEVIN IC	SEPH MCELENEY	<u>, ,</u>			represented party	
Address of Filer(s):	<b>•</b>	Updike, Kelly & Spellacy, 100 Pearl St., PO Box 231277, Hartford, CT 06123-1277					
Certificatio	<del></del>						
I certify that a (date)Ju	a copy of this d ul-7-2020 to n all attorneys a	ocument was or will immediately o all attorneys and self-represer and self-represented parties of re	nted parties of ecord who red	record and that written con	sent for electronic d	elivery was	
Name and addre	ess of each party ar	d attorney that copy was or will be mailed	d or delivered to*		For	Court Use Only	
JACOBS &	SODIPO LAW	OFFICES LLC - admin@jacob	ssodipo.con	1			
*If necessary	attach additional	sheet or sheets with name and add	ress which the	copy was or will be mailed or de	elivered to.		
Signed (Signatu			ame of person si				

**KEVIN JOSEPH MCELENEY** 

Jul-7-2020

Telephone number

860-548-2622